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CONFIRMATION NO. 1946

<b>SERIAL NUMBER</b> 10/719,102	<b>FILING OR 371(c) DATE</b> 11/21/2003 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1624	<b>ATTORNEY DOCKET NO.</b> 01-0163-CIP2	
<b>APPLICANTS</b> Elfatih Elzein, Fremont, CA; Rao Kalla, Cupertino, CA; Tim Marquart, Mountain View, CA; Jeff Zablocki, Mountain View, CA; Xiaofen Li, Palo Alto, CA;					
<b>** CONTINUING DATA *****</b> <i>MB</i> This application is a CIP of 10/431,167 05/06/2003 PAT 6,977,300 which is a CIP of 10/290,921 11/08/2002 PAT 6,825,349 which claims benefit of 60/348,222 11/09/2001 and claims benefit of 60/401,408 08/05/2002					
<b>** FOREIGN APPLICATIONS *****</b> <i>N/A</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 02/20/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 55	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 27716					
<b>TITLE</b> A2B adenosine receptor antagonists					
<b>FILING FEE RECEIVED</b> 851	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		